

## **Effect of Increased Provider Payments for Provision of Immediate Postpartum Long-Acting Reversible Contraception: Evidence From South Carolina's Medicaid Policy Change**

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Abstract: This study examines the effect of South Carolina Medicaid's 2012 policy change to begin providing reimbursement for immediate postpartum long-acting reversible contraception (LARCs). We analyzed Medicaid claims data using interrupted time series analysis to test whether Medicaid's policy affected trends in immediate postpartum LARC provision, provision of other forms of inpatient and outpatient postpartum contraception, and short-interval births (< 15, 21, and 27 months). All analysis was stratified by age group (i.e. teens and adult women). We find that the policy change increased the likelihood of immediate postpartum LARC provision for both teens and adults. The policy decreased postpartum sterilization and contraceptive pills and injectable use among adults but there was no statistically significant effect among teens. Finally, the policy decreased the probability of a short-interval birth among teens but had no significant effect on the probability of short-interval births among adult women.